

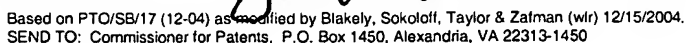


TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/040,398
		Filing Date	December 28, 2001
		First Named Inventor	Kjetil Johannessen
		Art Unit	2883
		Examiner Name	Mooney, Michael P.
Total Number of Pages in This Submission	12	Attorney Docket Number	42390P13377

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Certificate of First Class US Mail and the stamped return postcard.</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	3-29-05

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Typed or printed name	Krista Mathieson
Signature	
Date	3/29/05





2883
KJW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/040,398 Confirmation No. 2067
Inventor : Kjetil Johannessen
Assignee : Intel Corporation
Filed : December 28, 2001
Art Unit : 2883
Examiner : Mooney, Michael P.
Title : Optical Probe for Wafer Testing

OFFICE ACTION RESPONSE

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action mailed December 29, 2004, reconsideration and further examination of the application is hereby requested. Kindly consider the following:

CERTIFICATE OF TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be facsimile transmitted to the US Patent and Trademark Office on the date shown below:

March 29, 2005

Date of Transmission

Krista Mathieson

Name of Person Faxing Correspondence

Krista Mathieson
Signature

March 29, 2005
Date

INTRODUCTORY COMMENTS

Request for an Extension of Time

This Office Action Response is submitted in response to the Office Action dated December 29, 2004 for which the shortened statutory period for response was set to expire on March 29, 2005. It is believed that no additional extension of time fee is required. In the event any extension of time fee is required, or any other fee related to this Response is required, please consider this a request therefore. Authorization is hereby given to charge Deposit Account No. 02-2666 for such fee or fees.

Authorization to Charge Deposit Account

Authorization is hereby given to charge Deposit Account No. 02-2666 for any fee or fees related to this Office Action Response.